PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

plication or Docket Number 9843397

CLAIMS AS FILED - PART I (Column 1)						(Column 2) SMALL ENTITY			ITITY	OB	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS 35			<u> </u>				1	RATE	FEE) 	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		•	BASIC FEE	355.00	OR	BASIC FEE	·710.00
TOTAL CHARGEABLE CLAIMS			35 minus 20=		*	15		X\$ 9=		OR	X\$18=	270.00
INDEPENDENT CLAIMS			3 minus 3 =		*	0		X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	•
* If the difference in column 1 is less than zero, enter					"0" in c	olumn 2		TOTAL		OR	TOTAL.	980.00
CLAIMS AS AMENDED - PAR					TII					•	OTHER	
		(Column 1)	,	(Colur		(Column 3)		SMALL E	NTITY	OR.	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total .	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Ind pendent	* NTATION OF MU	Minus	***	CL AIM	=		X40=		OR	X80=	
<u></u>	iringi rucoc	NIANON OF MI	ŠELIĖCĖ ŅĖL	ÉINDÉINI	CLAIN		•	+135=		OR	+270=	
· `							L	TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE	,
		(Column 1)		(Colur	mn 2)	(Column 3)				•		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		<u> </u> =	11	X40=		OR	X80=	
L	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	ENDEN	CLAIM		┚╏	+135=		OR	+270=	
							L	TOTAL			TOTAL	
(Column 1) (Column 2) (Column 3)								ADDIT. FEE L			ADDIT. FEE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIC PAID	IEST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	**
AME	Independent	*	Minus	***	F OL A 13.4	=		X40=		OR	X80=	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT				CLAIM		」	+135=		OR	+270=	
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."									I	TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												